

University Park Plaza, 2829 University Ave SE, Suite 450 Minneapolis, MN 55414-3249 Website mn.gov/boards/dentistry Phone 612.617.2250 - Toll Free 888.240.4762 - Fax 612.617.2260 MN Relay Service for Hearing Impaired 800.627.3529

## RESTORATIVE FUNCTIONS

Before performing any or all restorative procedures limited to placing, contouring, and adjusting amalgam restorations, glass ionomers, class I and class V supragingival composite restorations where the margins are entirely within the enamel, adapting and cementing stainless steel crowns, and placing, contouring and adjusting Class II composite restorations on primary teeth; a licensed dental hygienist or dental assistant must successfully complete a board-approved course on these specific restorative procedures. Licensees must follow all provisions for restorative procedures under Minnesota Statute Section 150A.10, sub.4.

**SECTION 1** 

I certify that I have successfully completed the Restorative Functions course approved by the Board.	
Name ( <i>Please Print</i> )	License Number
Signature	 Date
SECTION 2	
Please complete the information requested below completed on restorative functions.	
Name of Institution	Address of Institution
Date Course Completed	City, State, Zip code
	() Phone Number of Institution

## **SECTION 3**

In addition to completing Sections 1 and 2, you **MUST** submit one of the following supporting documents with this form:

- 1) A notarized copy of a certificate of completion
- Other official record from the institution listed in Section 1 of this form, verifying your completion of a course in restorative functions.